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<b>State:</b>	District of Columbia	<b>Filing Company:</b>	Sentry Insurance a Mutual Company
<b>TOI/Sub-TOI:</b>	H04 Health - Blanket Accident /Sickness/H04.000 Health - Blanket Accident /Sickness		
<b>Product Name:</b>	American Legion Baseball 2014		
<b>Project Name/Number:</b>	/		

## Filing at a Glance

Company:	Sentry Insurance a Mutual Company
Product Name:	American Legion Baseball 2014
State:	District of Columbia
TOI:	H04 Health - Blanket Accident /Sickness
Sub-TOI:	H04.000 Health - Blanket Accident /Sickness
Filing Type:	Rate
Date Submitted:	01/16/2014
SERFF Tr Num:	SLIN-129376126
SERFF Status:	Pending Industry Response
State Tr Num:	
State Status:	
Co Tr Num:	
Implementation	On Approval
Date Requested:	
Author(s):	Linda Pawlowski
Reviewer(s):	Darniece Shirley (primary), Alula Selassie, Donghan Xu
Disposition Date:	
Disposition Status:	
Implementation Date:	
State Filing Description:	

**State:** District of Columbia  
**TOI/Sub-TOI:** H04 Health - Blanket Accident /Sickness/H04.000 Health - Blanket Accident /Sickness  
**Product Name:** American Legion Baseball 2014  
**Project Name/Number:** /

**Filing Company:** Sentry Insurance a Mutual Company

## General Information

Project Name: Status of Filing in Domicile: Not Filed  
Project Number: Date Approved in Domicile:  
Requested Filing Mode: Review & Approval Domicile Status Comments: This is a DC only filing. No filing required in WI.  
Explanation for Combination/Other: Market Type: Group  
Submission Type: New Submission Group Market Size: Large  
Group Market Type: Blanket Overall Rate Impact: 2.7%  
Filing Status Changed: 01/29/2014  
State Status Changed: Deemer Date:  
Created By: Brian Warner Submitted By: Brian Warner  
Corresponding Filing Tracking Number: SLIN-129376127

PPACA: Not PPACA-Related

PPACA Notes: null

Include Exchange Intentions: No

Filing Description:

SENTRY INSURANCE A MUTUAL COMPANY - NAIC #169-24988

RATE FILING - BLANKET ACCIDENT

680-162(Reprint 13) - Blanket Accident Policy

680-163(Reprint 13) - Blanket Accident Outline of Coverage

Filing ID # - SIAMCO 01162014

Proposed Effective Date: 3/1/2014

The purpose of this filing is to increase our current rates \$5.00 due to a request from the policyholder to increase the dental limit on this policy to \$10,000.

This is the initial filing of these rates with regard to the increased limits. The prior rates were last deemed "filed" on 1/12/1998 with what appears to be a filing ID # of NC-3269. This was a paper filing.

The rates for the above referenced forms are submitted for your review and approval. The corresponding form filing # is SLIN-129376127.

The policy is issued to the American Legion National Organization. The outlines of coverage will be issued to each enrolled American Legion baseball team. The American Legion is a social and mutual-aid veterans' organization that was founded in 1919 after World War I and chartered by an act of Congress. It is a non-profit organization. The policy language and rates were developed upon mutual bargaining between Sentry and the American Legion. This policy is not sold on the open market and is only available to the American Legion for their baseball program.

The only change in the previously approved rates is a \$5.00 per team increase. This is because of their request to change the dental limit from \$5,000 to \$10,000. The overall premium impact is approximately \$19,500.

We respectfully request your approval.

Brian Warner, J.D.

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**State:** District of Columbia  
**TOI/Sub-TOI:** H04 Health - Blanket Accident /Sickness/H04.000 Health - Blanket Accident /Sickness  
**Product Name:** American Legion Baseball 2014  
**Project Name/Number:** /

Compliance/Development  
715-346-7187 (voice)  
715-346-6044 (fax)  
Brian.Warner@Sentry.com

## Company and Contact

### Filing Contact Information

Brian Warner, Compliance/Development Analyst  
brian.warner@sentry.com  
1800 North Point Drive  
Stevens Point, WI 54481  
715-346-7187 [Phone]  
715-346-6044 [FAX]

### Filing Company Information

Sentry Insurance a Mutual Company	CoCode: 24988	State of Domicile: Wisconsin
1800 North Point Drive	Group Code: 169	Company Type:
Stevens Point, WI 54481	Group Name: Sentry Insurance Group	State ID Number:
(715) 346-6000 ext. [Phone]	FEIN Number: 39-0333950	

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## Filing Fees

Fee Required? No  
Retaliatory? No  
Fee Explanation:

State:	District of Columbia	Filing Company:	Sentry Insurance a Mutual Company
TOI/Sub-TOI:	H04 Health - Blanket Accident /Sickness/H04.000 Health - Blanket Accident /Sickness		
Product Name:	American Legion Baseball 2014		
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## Rate/Rule Schedule

Item No.	Schedule Item Status	Document Name	Affected Form Numbers (Separated with commas)	Rate Action	Rate Action Information	Attachments
1		ALB Rates	680-162 (Reprint 13), 680-163 (Reprint 13)	Revised	Previous State Filing Number: NC-3269 Percent Rate Change Request: 2.7	Rates for 2014-15.pdf,

# American Legion Baseball

## ENTRY Accident Insurance

### Rates per Team

<u>Plan</u>	<u>2013/2014</u>	With Dental Maximum to \$10,000 To be filed as <u>2014/2015</u>
Sr. Seasonal	\$160	\$165
Sr. Annual	\$235	\$240
Jr. Seasonal	\$140	\$145
Jr. Annual	\$205	\$210

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## Supporting Document Schedules

<b>Satisfied - Item:</b>	Cover Letter All Filings
<b>Comments:</b>	
<b>Attachment(s):</b>	ALB Cover Letter.pdf
<b>Item Status:</b>	
<b>Status Date:</b>	

<b>Bypassed - Item:</b>	Certificate of Authority to File
<b>Bypass Reason:</b>	Not a third party filing.
<b>Attachment(s):</b>	
<b>Item Status:</b>	
<b>Status Date:</b>	

<b>Satisfied - Item:</b>	Actuarial Memorandum
<b>Comments:</b>	
<b>Attachment(s):</b>	Actuarial Memo - ALBB ( 01-15-2014).pdf
<b>Item Status:</b>	
<b>Status Date:</b>	

<b>Satisfied - Item:</b>	Actuarial Justification
<b>Comments:</b>	Please see Actuarial Memorandum under the requirement of the same name.
<b>Attachment(s):</b>	
<b>Item Status:</b>	
<b>Status Date:</b>	

<b>Bypassed - Item:</b>	District of Columbia and Countrywide Loss Ratio Analysis (P&C)
<b>Bypass Reason:</b>	Not P&C.
<b>Attachment(s):</b>	
<b>Item Status:</b>	
<b>Status Date:</b>	

<b>Bypassed - Item:</b>	District of Columbia and Countrywide Experience for the Last 5 Years (P&C)
<b>Bypass Reason:</b>	Not P&C.
<b>Attachment(s):</b>	
<b>Item Status:</b>	
<b>Status Date:</b>	

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<b>Bypassed - Item:</b>	Consumer Disclosure Form
<b>Bypass Reason:</b>	N/A
<b>Attachment(s):</b>	
<b>Item Status:</b>	
<b>Status Date:</b>	

<b>Bypassed - Item:</b>	Actuarial Memorandum and Certifications
<b>Bypass Reason:</b>	Not submitting a QHP and this product is not a PPACA product.
<b>Attachment(s):</b>	
<b>Item Status:</b>	
<b>Status Date:</b>	

<b>Bypassed - Item:</b>	Unified Rate Review Template
<b>Bypass Reason:</b>	Not submitting a QHP and this product is not a PPACA product.
<b>Attachment(s):</b>	
<b>Item Status:</b>	
<b>Status Date:</b>	

Sentry Insurance a Mutual Company  
1800 North Point Drive  
P.O. Box 8020  
Stevens Point, WI 54481-8020

Brian Warner, J.D.  
Compliance/Development Analyst

brian.warner@sentry.com

715 346-7187  
715 346-6044 Fax



January 16, 2014

DC DEPARTMENT OF INSURANCE AND  
BANKING  
810 FIRST STREET NE  
SUITE 701  
WASHINGTON DC 20002

SENTRY INSURANCE A MUTUAL COMPANY - NAIC #169-24988  
RATE FILING - BLANKET ACCIDENT  
680-162(Reprint 13) - Blanket Accident Policy  
680-163(Reprint 13) - Blanket Accident Outline of Coverage  
Filing ID # - SIAMCO 01162014  
Proposed Effective Date: 3/1/2014

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We respectfully request your approval.

Brian Warner, J.D.  
Compliance/Development  
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**ACTUARIAL RATE FILING MEMORANDUM  
SPECIAL RISK BLANKET ACCIDENT INSURANCE  
POLICY FORMS 680-162**

1. Scope and Purpose

This is a rate and change in benefits policy form filing. This actuarial rate filing memorandum is not intended to be used for other purposes.

2. Description of Benefits Provided

This coverage will pay reasonable and customary medical, dental, and hospital or other facility expenses incurred due to accidental injuries while Insureds (registered American Legion Baseball players, managers, coaches and officers) are participating in any regularly approved baseball activity, practice sessions, regularly scheduled games, tournament games, or travel to or from any of these practices or games.

- a) Coverage is limited to \$100,000 per accident for medical expenses and \$5,000 which now will be increased to \$10,000 for dental expenses related to the accident. Coverage is first dollar, but is subject losses not covered by any other insurance. Other exclusions and limitations apply. The policy should be consulted for a complete description of benefits.

3. Renewability

This policy is optionally renewable, at the company's discretion.

4. Applicability

This policy is an open block with new policies and certificates issues each year.

5. Marketing Method

This policy is not available in the open market. It is designed solely for the American Legion. It is issued to the policyholder in Washington D.C..

6. Underwriting Method

This policy form is Guaranteed Issue.

7. Issue Age Limits

The Junior Plan is for the teams with all players age 17 & under, while the Senior Plan is for all other teams.

8. Premium Structure

The premiums are per team. Coverage is available for the baseball season at a rate of \$165 (\$160 in previously) per team, or for the entire year including the off-season at a rate of \$240 (\$235 previously), for the Senior American Legion Baseball teams. Coverage is also available for the baseball season at a rate of \$145 (\$140 previously) per team, or for the entire year including the off-season at a rate of \$210 (\$205 previously), for the Junior American Legion Baseball teams. Rate variations are based on differences in experience between the plans offered. Claims incidence and severity tend to be slightly higher on the senior teams.

9. The nature of the rate change and proposed rate methodology change

We are increasing the rate \$5 per team to increase the Dental maximum from \$5,000 to \$10,000.

10. The overall premium impact of filling DC policyholders

We anticipate writing approximately 3,900 teams for the 2014 to 2015 baseball season. The premium impact of this change is in total \$19,500 (\$5 per team).

11. Interest Rate Assumption

Due to the short nature of this coverage we are not using an interest rate assumption.

12. Trend Assumption

For the trend assumption we used actual observed trend for the 2008 through and including the 2012 baseball seasons with a future projected trend of 5%.

13. Persistency

As the plans are written each year for the new baseball season and the coverage is for that season we do not use a persistency assumption.

14. Premium Calculation Assumptions

Percentages of premium expenses are as follows:

Broker Commissions and Administration	20.0%
Sentry Claims Administration	4.8%
Premium Taxes	2.1%
Marketing Support and Overhead	6.4%
Sentry Risk Charge	<u>5.0%</u>
Total	38.3%

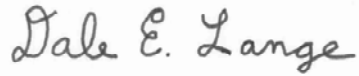
15. Anticipated Lifetime Loss Ratio

The anticipated lifetime loss ratio is expected to be 61.7%

16. Actuarial Certification

I, Dale E. Lange, am an Associate Actuary- Life and Health for Sentry Insurance. I am a member of the Society of Actuaries and American Academy of Actuaries, and meet the Qualification Standards to render this actuarial opinion.

I certify that, to the best of my knowledge and judgment, this rate filing is in compliance with the applicable laws of the District of Columbia and with the rules of the Department of Insurance. I also believe that the benefits provided are reasonable in relation to the proposed premiums.

A handwritten signature in cursive script that reads "Dale E. Lange". The signature is written in dark ink on a light-colored background.

January 15, 2014

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Dale E. Lange, FSA, MAAA

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Date